(080) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		278003	
<015>	Study Area Name		Central Louisiana Cellular, Li	LC
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding t		Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identifi			
_<039>	Contact Email Address - Email Address of person identif	ied in data line	<pre>&lt;030&gt; cstrausbaugh@cellonenation.com</pre>	n
<142>	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation	Name of Attache	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, Neach of these boxes to confirm the status described on t PDF, on line 145, demonstrates coordination with the T government pursuant to § 54.1004 includes:	he attached	ble) for	
<146>	Needs assessment and deployment planning with a foc community anchor institutions;	us on Tribal	Select (Yes, No, Not Applicable)	
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
			<del>                                     </del>	
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>	Compliance with Environmental Review processes			

<153> Compliance with Cultural Preservation review processes
<154> Compliance with Tribal Business and Licensing requirements.

(090) Project	Update Information.	FCC Form 690 Approved by OMB
		OMB Control No. 3060-1185
		Page 6 of 8
<010>	Study Area Code	278003
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200>	Date Authorized to Receive Support	08/08/2013
	• •	
<201>	Targeted Completion Date	08/09/2015
<202>	Total Mobility Fund Support Awarded	221903.28
<203>	Total Mobility Fund Support Disbursed	209121.65
<210>	Actual Completion Date	07/07/2015
	·	
<211>	Project Status Description (attached)	278003_PSD_LA.pdf
	Discontinuo de la la companya de la companya del companya del companya de la comp	{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	
43135	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	<u> </u>
<213>	Status of Network Deployment - Construction	<u> </u>
<214>	Status of Network Deployment - Deployment	
<215>	Status of Network Deployment - Maintenance	
<216>	Project Budget Status	<b>✓</b>
<217>	Project Plan Status	
<218>	Network will Support 3G/4G Mobile Service ?	) 3G O 4G

(101) Certification - Reporting Carrier  FCC Form 690  Approved by OMB  OMB Control No. 3060-1185  Page 7 of 8	Approved by OMB OMB Control No. 3060-1185
----------------------------------------------------------------------------------------------------------------	-------------------------------------------

<010>	Study Area Code	278003
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilest of my knowledge, the information reported on this form and	lities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the in any attachments is accurate.
Name of Reporting Carrier: Central Louisiana Cellular, 1	ile
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/28/2018
Printed name of Authorized Officer: Chad Strausbaugh	
Fitle or position of Authorized Officer: Staff Counsel	
Telephone number of Authorized Officer: 6105356474 ext.	
Study Area Code of Reporting Carrier: 278003	Filing Due Date for this form: 07/02/2018

<010>	Study Area Code	278003
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; my rea agent; and, to the best of my knowledge, the reports and data	is authorized to submit the information reported on behalf of the reporting carr consibilities include ensuring the accuracy of the data reporting requirements provided to the authorized provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

Certification of Agent Author	rized to File for Mobility Fund Recipients on Behalf of Re	porting Carrier
I, as agent for the reporting carrier, certify that I am auth reported herein based on data provided by the reporting	orized to submit the reports for Mobility Fund recipients on behalf carrier; and, to the best of my knowledge, the information reporte	of the reporting carrier; I have provided the data and herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agen		
Telephone number of Authorized Agent or Employee of A	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
Persons willfully making false statements on this form	can be punished by fine or forfeiture under the Communications Act of 193 18 of the United States Code, 18 U.S.C. § 1001.	34, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

# **Attachments**

#### (060) Coverage and Performance Report

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	278003
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year	08/2017 - 07/2018

<a>1> <a>2> <a>3> <a>41> <a>42> <a>45> <a>45 <a>45\$ Certify that **Total Road** Coverage and Total Resident Road Miles Miles Resident Performacne per Census Road Miles covered per **Population** Population Resident data is uploaded Newly Reached by Service Block Newly Reached by per Census Census Block Population per (yes/no) Reached Block Census Block Census Block Service State County Natchitoch es 0000 Yes 0 0.0 0.0 0.0 LΑ

> Percentage of Total Population Reached by Service

		- 1	
		- 1	
0		- 1	
•		- 1	
		- 1	
		- 1	
		,	

Percentage of Total Road Miles covered by Service

0			

Central Louisiana Cellular, LLC Form 690 — Annual Report for August 2017 — July 2018

### FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

#### **Project Status Description**

Item: SAC 278003

County/State: Natchitoches, LA Total Award Amount: \$221,903.28

#### **Project Description**

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

ı	,

Mobility	Fund			FCC Form Approved by OMB
Phase 1	- §54.1009 Annual Reporting			OMB 3060-1185
	lection Form		Avg. Burd	en Estimate per Respondent: 18 Hours
<010>	Study Area Code	278004	4	Accepted / Filed
<015>	Study Area Name	Central Louisiana Cellular, LLC		
<020>	Program Year	2018	Faul	JUN 29 2018
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh	reue	ral Communications Commission Office of the Secretary
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.		•
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com		
<040>	Has the information required pursuant to §54.1009	been provided with a Form 481 filing (Y/	<u>n)</u> <040>	•
	<041> Attach a description of the documents file	ed with the Form 481 reporting	<041>	
	<042> Cite the Study Area Code (SAC) for the Followship (SAC) for th	ana 401 samanhina	<042>	
	<042> Cite the Study Area Code (SAC) for the For	rm 461 reporting	<042>	
<080>	Tribal Lands Reporting (y/n?) (Does this study area cover	r tribal lands? Yes or No)	0	•

#### Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carı	ier Contact Form				FCC Form 690
					Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code			278004	
<015>	Study Area Name			Central Louisiana Cellular, LLC	
<020>	Program Year			2018	
<030>	Contact Name - Person USAC should contact r			Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person			6105356474 ext.	
<039>	Contact Email Address - Email Address of pers	on identi	ried in data line <030>	cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidde	<u>er</u>			
<110>	FCC Registration Number		20165583		
<111>	Filing Carrier Name		Central Louisiana C	Cellular LLC	
<112>	Winning Bidder Carrier Name		-		
<113>	-		Central Louisiana C		
	Street Address (or PO Box)		900 West Valley Roa	ad, Suite 600	
<114>	City		Wayne		
<115>	State		PA		
<116>	Zip-Code		19087		
<117>	Telephone Number		6105356474 ext.		
<118>	Fax Number		6106885209		
<119>	Email Address		cstrausbaugh@cellon	nenation.com	
Contact Ir	<u>iformation</u>				
	if same as above, indicate in this box				
<120>	Name (First, MI, Last, Suffix)	ш	Chad Strausbaugh		
<121>	Filing Carrier Name		Central Louisiana C	ellular LLC	
<122>	Street Address (or PO Box)				
			900 West Valley Roa	d. Suite 600	
<123>	City		Wayne		
<124>	State		PA		
<125>	Zip-Code		19087		
<126>	Telephone Number		6105356474 ext.		
<127>	Fax Number		6106885209		
<128>	Email Address		cstrausbaugh@cellon	enation.com	
	4.4				
Autnorize	d Agent Information if no agent, indicate in this box	$\checkmark$			
<130>	Name (First, MI, Last, Suffix)				
<131>	Company				
<132>	Street Address (or PO Box)				-
<133>	City				3 10 10 10 10 10 10 10 10 10 10 10 10 10
<134>		•			
	State	•	•	· · · · · · · · · · · · · · · · · · ·	
<135>	Zip-Code	•			
<136>	Telephone Number	-			
<137>	Fax Number				
<138>	Email Address	_			

Page 3 of 8
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<010>	Study Area Code	278004
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	. cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year 08/2017 - 07/2018	

Coverage and Performace attachments

<a1></a1>	<a2></a2>	<e3></e3>	<b1></b1>	<b2></b2>	<b3></b3>	<c1></c1>	<c2></c2>	<c3></c3>	<d>&gt;</d>
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							Road	Total Road	Certify tha
						Road	Miles per	Miles	Coverage a
				Resident Population	Total Resident Population	Miles per	Census Block	covered	Performar is uploade
			Population per	Newly Reached	Reached by	Census	Newly	Census	(Yes/no)
State	County	Census Block	Census Block	by Service	Service	Block	Reached	Block	
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		<u> </u>							+

Percentage of Total
Population Reached by
Service

Percentage of Total
Road Miles covered
by Service

	Seculification and the control of the	The second of the second of
	Form 690	
(070) Urban Rate Comparability Certification Compliance	I OI III UJO	6000 [11 P.] 100
INITION RATE LOMORIABILITY CELLICATION COMPRISE	- \$150 Perfect \$1,000	7-11-12 / 12 (No1)
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The state of the s		3394 St. Carlot
	CONTRACTOR SECURITION OF THE SECURITION OF	30% of 25 to 2 ft
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<010>	Study Area Code	278004
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)  I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.					
Signature of Authorized Officer:	CERTIFIED ONLINE		Date 06/28/2018		
Printed name of Authorized Officer:	Chad Strausbaugh				
Title or position of Authorized Officer:	Staff Counsel				
Telephone number of Authorized Officer:	6105356474 ext.				
Study Area Code of Reporting Carrier:	278004	Filing Due Date for this form: 07/02/2018			

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

I 455 that (Name of Agent)	an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier is authorized to submit the information reported on behalf of the reporting rting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the and data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be pun	ished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment ler Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification of Agent Authorize	d to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am authorize data provided by the reporting carrier; and, to the best of my	ed to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Agent	
	Filing Due Date for this form:
Study Area Code of Reporting Carrier:	Filing Due Date for this form:  De punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

(080) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		278004	
<015>	Study Area Name		Central Louisiana Cellular, LLC	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding		Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identifi		6105356474 ext.	
<039>	Contact Email Address - Email Address of person identif	ied in data line <030>	cstrausbaugh@cellonenation.com	
<142>	State			
442				
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation			
		Name of Attached Docum	ent (.pdf)	
	If your company serves Tribal lands, please select (Yes, leach of these boxes to confirm the status described on			
	PDF, on line 145, demonstrates coordination with the T government pursuant to § 54.1004 includes:	ribal		
<146>	Needs assessment and deployment planning with a foc	(Yes	, No, Not Applicable)	

<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	(Yes, No, Not Applicable)
-117	•	
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

.

(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
-010	Study Area Code	278004
<010> <015>	Study Area Code	Central Louisiana Cellular, LLC
<020>	Study Area Name Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200>	Date Authorized to Receive Support	08/08/2013 08/09/2015
<201>	Targeted Completion Date	08/09/2013
<202>	Total Mobility Fund Support Awarded	221923.26
<203>	Total Mobility Fund Support Disbursed	198199.66
<210>	Actual Completion Date	06/23/2015
<211>	Project Status Description (attached)	278004_PSD_LA.pdf
		{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	<u> </u>
<214>	Status of Network Deployment - Deployment	
<215>	Status of Network Deployment - Maintenance	<del></del>
<216>	Project Budget Status	<u> </u>
<217>	Project Plan Status	
<218>	Network will Support 3G/4G Mobile Service ?	3G <b>O</b> 4G

FCC Form 690
101) Certification - Reporting Carrier
Approved by OMB
OMB Control No. 3060-1185
Page 7 of 8

<010>	Study Area Code	278004
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<030>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
_<035>_	Contact Telephone Number - Number of person identified in data line <0305	cstrausbaugh@cellonenation.com
<039>	Contact Email Address - Email Address of person identified in data line <030>	CSC144BB4451CCC11CC

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

			to the
certify that I am an officer of the reporting	carrier; my responsibilities inc	lude ensuring the accuracy of the reporti	ng requirements for Mobility Fund recipients; and, to the
pest of my knowledge, the information repo	rted on this form and in any a	ttaciunents is accurate.	
Name of Reporting Carrier: Central I	ouisiana Cellular, LLC		
Signature of Authorized Officer:	RTIFIED ONLINE		Date 06/28/2018
	ad Strausbaugh		
Title or position of Authorized Officer:	Staff Counsel		
Telephone number of Authorized Officer:	6105356474 ext.		
Study Area Code of Reporting Carrier:	278004	Filing Due Date for this form:	07/02/2018

	FCC Form 690
(102) Certification - Agent / Carrier	FLC POPIL 050
(102) Certification - Agency Corner	Approved by OMB
	1
	OMB Control No. 3060-1185
	Page 8 of 8
	Page o U o

<010>	Study Area Code	278004
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporti also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorize agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date:			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier				
I, as agent for the reporting carrier, certify that I am auth reported herein based on data provided by the reporting	orized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier carrier; and, to the best of my knowledge, the information reported herein is accurate.	r; I have provided the data		
Name of Reporting Carrier:				
Name of Authorized Agent Firm:				
Signature of Authorized Agent or Employee of Agent:	Da	te:		
Name of Authorized Agent Employee:				
Title or position of Authorized Agent or Employee of Ager	nt			
Telephone number of Authorized Agent or Employee of A				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
	can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(i 18 of the United States Code, 18 U.S.C. § 1001.	b), or fine or imprisonment under Title		

# **Attachments**

## (060) Coverage and Performance Report

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	278004
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>		08/2017 - 07/2018

Certify that **Total Road** Coverage and Road Miles Miles Resident **Total Resident** Performacne per Census Population Road Miles covered per Population Resident data is uploaded **Block Newly** Census Block Population per **Newly Reached** per Census Reached by (yes/no) Reached by Service Block Census Block Service Census Block State County Natchitoch es Yes 0000 0 0.0 0.0 0 0 LA

> Percentage of Total Population Reached by Service

		ı
0		
		ı
		ı
		ı
		ı
		ı

Percentage of Total Road Miles covered by Service

0			

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

## FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

#### **Project Status Description**

Item: SAC 278004

County/State: Natchitoches, LA Total Award Amount: \$221,923.26

#### **Project Description**

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

			FCC Form
Mobility	Fund		Approved by OMB
Phase 1	§54.1009 Annual Reporting		OMB 3060-1185
Data Col	lection Form		Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	278005	A C C SMARA
<015>	Study Area Name	Central Louisiana Cellular, LLC	Accepted / Filed
<020>	Program Year	2018	JUN 2 9 2018
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh	Federal Communications Commission
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.	Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com	
<040>	Has the information required pursuant to §54.1009 l	been provided with a Form 481 filing (Y/N)	<040>
	<041> Attach a description of the documents file	ed with the Form 481 reporting	<041>
	<042> Cite the Study Area Code (SAC) for the For	rm 481 reporting	<042>
<080>	Tribal Lands Reporting (y/n?) (Does this study area cove	u tribal lande? Var or No.)	
<b>~000</b> /	(Does this study area cove	i unuai iunas: 165 01 NOj	$\cup$ $\bullet$

#### Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase | Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carri	ier Contact Form			FCC Form 690 Approved by OMB OMB Control No. 3060-1185
				Page 2 of 8
<010>	Study Area Code		278005	
<015>	Study Area Name		Central Louisiana Cellular, LLC	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding	this data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identi	ified in data line <030>	6105356474 ext.	
<039>	Contact Email Address - Email Address of person ident	tified in data line <030>	cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder			
<110>	FCC Registration Number	20165583		
<111>	Filing Carrier Name	Central Louisiana	Cellular, LLC	
<112>	Winning Bidder Carrier Name	Central Louisiana	Cellular, LLC	
<113>	Street Address (or PO Box)	900 West Valley Ro		
		Wayne		
<114>	City			
<115>	State	PA		
<116>	Zip-Code	19087		
<117>	Telephone Number	6105356474 ext.		
<118>	Fax Number	6106885209		
<119>	Email Address	cstrausbaugh@cellc	onenation.com	
Contact I	if same as above, indicate in this box	]		
<120>	Name (First, MI, Last, Suffix)	Chad Strausbaugh		
<121>	Filing Carrier Name	Central Louisiana	Cellular, LLC	
<122>	Street Address (or PO Box)	900 West Valley Ro	ad Suite 600	
<123>	City	Wayne		
<124>	State	PA		
<125>	Zip-Code	19087		
<126>	Telephone Number	6105356474 ext.		
<127>	Fax Number	6106885209		
<128>	Email Address	cstrausbaugh@cellc	onenation.com	
<120>	Elliali Address	CSCIAUSDAUGHGCCIIC	, , , , , , , , , , , , , , , , , , ,	
Authoriz	ed Agent Information	7		
	if no agent, indicate in this box ✓			
<130>	Name (First, MI, Last, Suffix)			
<131>				
<132>				
<133>				
<134>	·			
<135>	•			
<136>	•			
<137>				
<138>	Email Address			

	FCC Form 690	
(060) Coverage and Performance Report		
	Ap proved by OMB	
	OMB Control No. 3060-1185	
	Page 3 of 8	
	5-85-7-97-3-38-9-9-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-	_

<010>	Study Area Code	278005
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year 08/2017 - 07/2018	

	278005_CPRd_LA.zip
Coverage and Performace attachments	

					ŀ		Ì		
			Resident	Resident Population Newly Reached	Total Resident Population Reached by	Road Miles per Census	Road Miles per Census Block Newly	Total Road Miles covered per Census	Certify that Coverage an Performanc is uploaded (Yes/no)
State	County		Census Block	by Service	Service	Block	Reached	Block	<del> </del>
-									
								<u> </u>	
	<u> </u>	<del> </del>		ee attach	<u>ed works</u>	neet_	<u> </u>		
		<del>                                     </del>	<del></del>						
							<del> </del>		
						<del> </del>	<u> </u>	<del> </del>	+
<u> </u>				<del>                                     </del>	<u> </u>	<u> </u>	+		<del>                                     </del>

	0	,	0
Percentage of Total Population Reached by Service		Percentage of Total Road Miles covered by Service	

	\$77.5 (A) 11.5 (A)
FCC Form 690	
170) Urban Rate Comparability Certification Compliance	T. C. S. A. A. A. A.
Approved by OMB	Sec. 45, 25, 254.
Commence of Commen	
OMB Control No. 3060	110E
OMB CONTO NO. SUO	-1103
	903 874 F40 F
Page 4 of 8	支援 かいど 白

<010>	Study Area Code	278005
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

		oyee as to Compliance with 47 (	
certify that I am an officer or employee of orm and in any attachments is accurate.	the reporting carrier; my responsil	oilities include ensuring compliance v	with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier: Cent.	ral Louisiana Cellular, LLC		
Signature of Authorized Officer:	CERTIFIED ONLINE		Date 06/28/2018
Printed name of Authorized Officer:	Chad Strausbaugh		
itle or position of Authorized Officer:	Staff Counsel		
elephone number of Authorized Officer:	6105356474 ext.		
itudy Area Code of Reporting Carrier:	278005	Filing Due Date for this form:	07/02/2018

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to author	rize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
and the Alberta of Aments	is authorized to submit the information reported on behalf of the reporting eporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be	punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification of Agent Authoriz	to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am author data provided by the reporting carrier; and, to the best of n	d to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Age	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form car	e punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment un Title 18 of the United States Code, 18 U.S.C. § 1001.

180) Triba	il Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		278005	
<015>	Study Area Name		Central Louisiana Cellular,	LLC
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding t		Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identifie			
<039>	Contact Email Address - Email Address of person identifi	ed in data line <	030> cstrausbaugh@cellonenation.	com
<142>	State			
<143>	County	****		
<144>	Tribal Land(s) on which ETC Serves			
<b>\144</b> >	Tisoal Land(s) on which the serves			
<145>	Tribal Government Engagement Obligation	Name of Attached	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, leach of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the T government pursuant to § 54.1004 includes:	the attached	ole) for	
11.465		Telled	Select (Yes, No, Not Applicable)	
<146>	Needs assessment and deployment planning with a foo community anchor institutions;	cus on Tribal		
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>	Compliance with Environmental Review processes		1	

Compliance with Cultural Preservation review processes

<154> Compliance with Tribal Business and Licensing requirements.

<153>

(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	278005
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200>	Date Authorized to Receive Support	08/08/2013
<201>	Targeted Completion Date	08/09/2015
<202>	Total Mobility Fund Support Awarded	415562.67
<203>	Total Mobility Fund Support Disbursed	385434.38
<210>	Actual Completion Date	07/13/2015
<211>	Project Status Description (attached)	278005_PSD_LA.pdf
	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information	{Name of PDF attached}
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	1
<214>	Status of Network Deployment - Deployment	✓
<215>	Status of Network Deployment - Maintenance	<u>✓</u>
<216>	Project Budget Status	<u> </u>
<217>	Project Plan Status	
<218>	Network will Support 3G/4G Mobile Service ?	) 3G

((101) Certification - Reporting Carrier	FCC Form 690
Moth cermination - uchoi mile carrier	FCC FOILIF 050
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	Approved by OMB
	OMB Control No. 3060-1185
	21115 CONG. 01 1101 GOOD 2200
	Page 7 of 8
	1050/010

<010>	Study Area Code	278005
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the pest of my knowledge, the information reported on this form and in any attachments is accurate.										
Name of Reporting Carrier: Central Louisiana Cellular, LLC										
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/28/2018									
Printed name of Authorized Officer: Chad Strausbaugh										
Title or position of Authorized Officer: Staff Counsel	•									
Telephone number of Authorized Officer: 6105356474 ext.										
Study Area Code of Reporting Carrier: 278005	Filing Due Date for this form: 07/02/2018									

(102) Certification - Agent / Carrier	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 8 of 8
---------------------------------------	-----------------------------------------------------------------------------

<010>	Study Area Code	278005
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstraushaugh@cellonenation.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier. I lso certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized gent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.										
Name of Authorized Agent:										
Name of Reporting Carrier:										
Signature of Authorized Officer:	Date:									
Printed name of Authorized Officer:										
Title or position of Authorized Officer:										
Telephone number of Authorized Officer:										
Study Area Code of Reporting Carrier:	Filing Due Date for this form:									

on behalf of the reporting carrier; I have provided the data on reported herein is accurate.
Date:

# **Attachments**

																	H	

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	278005
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year	08/2017 - 07/2018

<a1> <a2> <a3> <b1> <b2> <b1> <b2> <b3> <c1> <c2> <c2> <c3> <b1> <c3> <b1 Certify that **Total Road** Coverage and Performacne Resident **Total Resident Road Miles** Miles Population Population Road Miles per Census Resident covered per data is uploaded Population per **Newly Reached** Reached by per Census **Block Newly** Census Block County Census Block
Natchitoch 0000
es (yes/no) Census Block by Service Block Reached Service State Yes 0 0.0 0.0 0.0

> Percentage of Total Population Reached by Service

0			

Percentage of Total Road Miles covered by Service

0		

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

### FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

#### **Project Status Description**

Item: SAC 278005

County/State: Natchitoches, LA Total Award Amount: \$415,562.67

#### **Project Description**

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

				FCC Form
Mobility	Fund			Approved by OMB
Phase 1	§54.1009 Annual Reporting			OMB 3060-1185
Data Col	lection Form		Avg. Burd	en Estimate per Respondent: 18 Hours
<010>	Study Area Code	278006		
<015>	Study Area Name	Central Louisiana Cellular, LLC		Accepted / Filed
<020>	Program Year	2018		•
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh		JUN 2 9 2018
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.		Pederal Communications Commission Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com		
<040>	Has the information required pursuant to §54.1009	been provided with a Form 481 filing (Y/N	1 <040> O	•
	<041> Attach a description of the documents file	ed with the Form 481 reporting	<041>	
	<042> Cite the Study Area Code (SAC) for the Fo	rm 481 reporting	<042>	
			_	
<080>	Tribal Lands Reporting (y/n?) (Does this study area cover	er tribal lands? Yes or No)	0	$\odot$

#### Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carr	ier Contact Form		**	FCC Form 690
	emple in the second sec			Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code		278006	
<015>	Study Area Name		Central Louisiana Cellular, LLC	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact		Chad Strausbaugh	
<035>	Contact Telephone Number - Number of pers		6105356474 ext.	
<039>	Contact Email Address - Email Address of per	son identified in data line <030>	cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidd	<u>er</u>		
<110>	FCC Registration Number	20165583		
<111>	Filing Carrier Name	Central Louisiana	Cellular, LLC	
<112>	Winning Bidder Carrier Name	Central Louisiana		
<113>	Street Address (or PO Box)			
		900 West Valley Ro	Jad, Builte 600	
<114>	City	Wayne		
<115>	State	PA		
<116>	Zip-Code	19087		
<117>	Telephone Number	6105356474 ext.		
<118>	Fax Number	6106885209		
<119>	Email Address	cstrausbaugh@cellc	onenation.com	
<120> <121> <122> <122> <123> <124> <125> <126>	if same as above, indicate in this box Name (First, MI, Last, Suffix) Filing Carrier Name Street Address (or PO Box) City State Zip-Code Telephone Number	Chad Strausbaugh Central Louisiana GOO West Valley Bo Wayne PA 19087 6105356474 ext.		
<127>	Fax Number	6106885209	····	
<128>	Email Address	cstrausbaugh@cello	onenation.com	
Authorize	ed Agent Information if no agent, indicate in this box	<i>-</i>		
<130>	Name (First, MI, Last, Suffix)			-
<131>	Company			
<132>	Street Address (or PO Box)		_	
<133>	City			
<134>	State			
<135>	Zip-Code			
<136>		<u></u>		
	Telephone Number			
<137>	Fax Number			
<138>	Email Address			

(060) Co	verage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	278006
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year 08/2017 - 07/2018	

278006\_CPRd\_LA.zip

Coverage and Performace attachments

<141>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<c1></c1>	<c2></c2>	<c3></c3>	<d>&gt;</d>
									Total	
							Road	Road Miles per	Road Miles	Certify that Coverage and
					Resident	Total Resident		Census	covered	Performance data
						Population	per	Block	per	is uploaded
	State	County			Newly Reached by Service		Census Block		Census Block	(Yes/no)
	Jiale	County	Celisus Block	Celisus Block	by Service	Service	DIOCK	reactieu	BIOCK	
								···		
				8	ee attach	ed worksl	<u>neet</u>			
								<u> </u>		
							<del></del>	<u>                                     </u>		

Percentage of Total
Population Reached by Service

Percentage of Total
Road Miles covered
by Service

	THE PERSON OF TH
COCC	orm 690
(070) Urban Rate Comparability Certification Compliance	Jim DJG
	29203838-0-48-5- (ENZBOD) CHO SCOLI (000) (
Ameri	oved by OMB
L Ophic	Acc of Millo
OMP	Control No. 3060-1185
CIVID	COURTOU MO. DOOD-TTOD
	(1998일(C.C.)) [1 ] 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1 :
Page	A ne Q
rașe	7010

<010>	Study Area Code	278006
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

ertification of Officer or Er	nployee as to Compliance with 47 CFR §54.1009(a)(4)	
the reporting carrier; my response	onsibilities include ensuring compliance with 47 CFR §54.1009	a)(4), the information reported on this
ral Louisiana Cellular, LI	-c	
CERTIFIED ONLINE		Date 06/28/2018
Chad Strausbaugh		
Staff Counsel		
6105356474 ext.		
278006	Filing Due Date for this form: 07/02/2018	40 00
	the reporting carrier; my responsable ral Louisiana Cellular, Li CERTIFIED ONLINE Chad Strausbaugh Staff Counsel 6105356474 ext.	Chad Strausbaugh Staff Counsel 6105356474 ext.

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) carrier. I also certify that I am an officer or employee of the r authorized agent; and, to the best of my knowledge, the repo	is authorized to submit the information reported on behalf of the reporting porting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the is and data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
	ounished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

d the data reported herein based on
Date:

0 <b>8</b> 0) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		278006	
<015>	Study Area Code Study Area Name		Central Louisiana Cellular, Li	LC
<020>	Program Year		2018	<del></del>
<030>	Contact Name - Person USAC should contact regarding to	this data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identifi			
<039>	Contact Email Address - Email Address of person identif	ied in data line <	(030) cstrausbauqh@cellonenation.com	n
<142>	State			
<143>	County			····
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation			
		Name of Attached	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, each of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the 1 government pursuant to § 54.1004 includes:	the attached	ole) for	
<146>	Needs assessment and deployment planning with a fee	oue on Tribal	Select (Yes, No, Not Applicable)	
-2-10/	Needs assessment and deployment planning with a foo community anchor institutions;	Jus Oil Hilbal		
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules		<u> </u>	
<152>	Compliance with Environmental Review processes			

<153> Compliance with Cultural Preservation review processes
<154> Compliance with Tribal Business and Licensing requirements.

(090) Project	Update Information	FCC Form 690
		Approved by OMB
	and the second of the second o	OMB Control No. 3060-1185
		Page 6 of 8
<010>	Study Area Code	278006
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200>	Date Authorized to Receive Support	08/08/2013
<201>	Targeted Completion Date	08/09/2015
<202>	Total Mobility Fund Support Awarded	28080.00
<203>	Total Mobility Fund Support Disbursed	27658.80
<210>	Actual Completion Date	06/10/2015
		278006 PSD LA.pdf
<211>	Project Status Description (attached)	
		{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	<b>✓</b>
<213>	Status of Network Deployment - Construction	<b>√</b>
<214>	Status of Network Deployment - Deployment	<b>✓</b>
<215>	Status of Network Deployment - Maintenance	<b>✓</b>
<216>	Project Budget Status	✓
<217>	Project Plan Status	✓
424 <i>0</i> 5	Notice when will Support 20/40 Mobile Service 2	36 046
<218>	Network will Support 3G/4G Mobile Service ?	) 3G ( ) 4G

	FCC Form 690
(101) Certification - Reporting Carrier	rectormeso.
) · ·	Approved by OMB
4-10	Approved by Olivio
	ONED COMMANDE 2000 1195
	OMB Control No. 3060-1185
	2.40
	Page 7 of 8

<010>	Study Area Code	278006
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities inclu best of my knowledge, the information reported on this form and in any atta	de ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the achments is accurate.
Name of Reporting Carrier: Central Louisiana Cellular, LLC	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/28/2018
Printed name of Authorized Officer: Chad Strausbaugh	
Title or position of Authorized Officer: Staff Counsel	
Telephone number of Authorized Officer: 6105356474 ext.	
Study Area Code of Reporting Carrier: 278006	Filing Due Date for this form: 07/02/2018

	orm 690	
(102) Certification - Agent / Carrier		
	oved by OMB	
	Control No. 3060-1185	
	8 of 8	

<010>	Study Area Code	278006
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; my agent; and, to the best of my knowledge, the reports and	is authorized to submit the information reported on behalf of the reporting carrier. responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized lata provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Author	ized to File for Mobility Fund Recipients on Behalf of Rep	orting Carrier
I, as agent for the reporting carrier, certify that I am autho reported herein based on data provided by the reporting c	rized to submit the reports for Mobility Fund recipients on behalf arrier; and, to the best of my knowledge, the information reported	of the reporting carrier; I have provided the data d herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Ag	ent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
Persons willfully making false statements on this form of	an be punished by fine or forfeiture under the Communications Act of 1934 18 of the United States Code, 18 U.S.C. § 1001.	4, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

**Attachments** 

#### (060) Coverage and Performance Report

<141>

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	278006
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>		08/2017 - 07/2018

 
 <a2>
 <a3>
 <b2>
 <a3>
 <c1>
 <c2>
 <c2>
 <c3>
 <c4>
 Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne per Census **Road Miles** covered per Resident Population Population data is uploaded Block Newly Newly Reached by Service Census Block Population per Reached by per Census (yes/no) Reached Census Block Service Block Census Block State County Rapides 0000 Yes 0.0 0 0.0 0.0 LA

Percentage of
<b>Total Population</b>
Reached by
Service

0

Percentage of Total Road Miles covered by Service

0			

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

### FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2017 – July 2018

#### **Project Status Description**

Item: SAC 278006

County/State: Rapides, LA

Total Award Amount: \$28,080.00

#### **Project Description**

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

			FCC Form
Mobility	Fund		Approved by OMB
	- §54.1009 Annual Reporting		OMB 3060-1185
	lection Form		Avg. Burden Estimate per Respondent: 18 Hours
Data Col	lection Form		
<010>	Study Area Code	278007	
<015>	Study Area Name	Central Louisiana Cellular, LLC	Accepted / Filed
<020>	Program Year	2018	JUN 2 9 2018
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh	Federal Communications Commission
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.	Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com	
	Has the information required pursuant to §54.1009	been provided with a Form 481 filing (Y/N	<u>u)</u> <040>
<040>	Has the information required pursuant to 934.1009	been provided with a rottli 401 ming (1714	
	<041> Attach a description of the documents fil	ed with the Form 481 reporting	<041>
	<042> Cite the Study Area Code (SAC) for the Fo	orm 481 reporting	<042>
<080>	Tribal Lands Reporting (y/n?) (Does this study area con	ver tribal lands? Yes or No)	$\circ$

#### Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carr	ler Contact Form			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
040	St. A. A. Code		278007	
<010>	Study Area Code Study Area Name		Central Louisiana Cellular, LLC	
<015> <020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this	data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identified	in data line <030>	6105356474 ext.	
<039>	Contact Email Address - Email Address of person identified	in data line <030>	cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder			
<110>		0165583		
<111>		entral Louisiana (	Cellular, LLC	
<112>	<del>-</del>	entral Louisiana (	Cellular, LLC	
<113>		00 West Valley Roa		
	14	ayne		
<114>	_			
<115>	_	9087		
<116>				
<117>	·	105356474 ext.		
<118>		106885209		
<119>	Email Address	strausbaugh@cello	nenation.com	
<120> <121> <122> <123> <124> <125> <126> <127> <128>	Filing Carrier Name         C           Street Address (or PO Box)         9           City         W           State         P           Zip-Code         1           Telephone Number         6           Fax Number         6	had Strausbaugh entral Louisiana ( 00 West Valley Rogayne A 9087 105356474 ext. 106885209 estrausbaugh@cello	30. Suite 600	
Authoriz	ed Agent Information if no agent, indicate in this box			
<130>	Name (First, MI, Last, Suffix)			
<131>				
<132>	Street Address (or PO Box)	<del></del>		
<133>	City			
<134>	State			
<135>	Zip-Code			
<136>	Telephone Number			
<137>				
<138>				
	<del>-</del>			

ţ.

FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8

<010>	Study Area Code	278007
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year 08/2017 - 07/2018	

	278007_CPRd_LA.zip
Coverage and Performace attachments	

Ì									ŀ
				Resident Population Newly Reached	Total Resident Population Reached by	per Census	Road Miles per Census Block Newly	Total Road Miles covered per Census	Certify that Coverage ar Performand is uploaded (Yes/no)
State	County	Census Block	Census Block	by Service	Service	Block	Reached	Block	
	<u> </u>								
			(	ee attach	<u>led works</u>	<u>heet</u>	<del> </del>	<del>                                     </del>	+
	<del>                                     </del>	<del> </del>	<u></u>			<del>                                     </del>	ļ		-
	+			<del></del>		<u> </u>			
					<u> </u>		<del> </del> -	1	
	<u> </u>	_		<u> </u>	<u> </u>	<u> </u>	_1		

Percentage of Total
Population Reached by
Service

Percentage of Total
Road Miles covered
by Service

070) Urban Rate Comparability Certification	on Compliance	- 194 - 194	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
osc Sudu Assa Codo		278007	
<010> Study Area Code			
0.5 0. 1 0 1		Central Louisiana Cellular, LLC	
<015> Study Area Name			
<020> Program Year		2018	
<020> Program Year <030> Contact Name - Person USAC should	d contact regarding this data		
<020> Program Year <030> Contact Name - Person USAC should	d contact regarding this data per of person identified in data line <030>	2018	

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)								
I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this formand in any attachments is accurate.								
Name of Reporting Carrier: Cent	ral Louisiana Cellular, LL	c						
Signature of Authorized Officer:	CERTIFIED ONLINE		Date 06/28/2018					
Printed name of Authorized Officer:	Chad Strausbaugh							
Fitle or position of Authorized Officer:	Staff Counsel							
Telephone number of Authorized Officer:	6105356474 ext.							
Study Area Code of Reporting Carrier:	278007	Filing Due Date for this form:	07/02/2018					

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to auth	orize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting e reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the ports and data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	ed to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am author data provided by the reporting carrier; and, to the best of n	ized to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on Ny knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Age	nt:
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
	n be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

980) Triba	al Lands Reporting		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code	278007	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identified in data line <	030> 6105356474 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <		
<142>	State		<del></del>
<143>	County		
<144>	Tribal Land(s) on which ETC Serves		
<145>	Tribal Government Engagement Obligation  Name of Attached	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, No, Not Applical each of these boxes to confirm the status described on the attached	ble) for	

		Select
		(Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8	
<010>	Study Area Code	278007	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identified in data line <030>	> 6105356474 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030> cstrausbaugh@cellonenation.com		
<200>	Date Authorized to Receive Support	08/08/2013	
<201>	Targeted Completion Date	08/09/2015	
<202>	Total Mobility Fund Support Awarded	229284.00	
<203>	Total Mobility Fund Support Disbursed	207547.88	
<210> <211>	Actual Completion Date  Project Status Description (attached)	06/05/2015 278007_PSD_LA.pdf	
	Please check these boxes below to confirm that the attached PDF, on line	{Name of PDF attached}	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.		
<212>	Status of Network Deployment - Network Design	<u> </u>	
<213>	Status of Network Deployment - Construction	<u> </u>	
<214>	Status of Network Deployment - Deployment		
<215>	Status of Network Deployment - Maintenance	<u> </u>	
<216>	Project Budget Status		
<217>	Project Plan Status		
<218>	Network will Support 3G/4G Mobile Service ?	) 3G	